used. The solutions should be of known strength and have a sufficient amount of hydrochloric acid, which, so far as the germicidal action goes, is the active agent rather than the hydrogen peroxide itself. The hydrochloric acid should be in small percentages, one-fifth of one per cent.—about as much as there is in the gastric juice. The pressure of the air for spraying should be about six, or at most eight, pounds to the inch. Cultures should be made from the throat after a few days, and if the bacilli of diphtheria are absent, local treatment, as a rule, may be stopped.—*Ibidem*, p. 160.

THE PREVENTION OF CONSUMPTIVE DISEASE.

DR. BENJAMIN WARD RICHARDSON promulgates the following as a sanitary decalogue: 1. Pure air for breathing is the first rule for the prevention of consumption. 2. Active exercise, outdoor as much as possible, is essential. 3. Uniform climate is important. 4. The dress should sustain uniform warmth. 5. The hours of rest should be carefully regulated by the sunlight. 6. Outdoor occupation is preventive. 7. The amusements should favor muscular development and sustain healthy respiration. 8. Cleanliness in the broadest sense is of especial moment. 9. Every precaution should be taken to avoid colds. 10. The diet should be ample with full proportion of the respiratory foods.—*The Asclepiad*, 1894, No. 42, p. 147.

THE POSTURE OF THE HEAD IN ACCIDENT WHEN THE PATIENT IS UNDER AN ANÆSTHETIC.

DR. H. A. HARE has carefully reviewed the work of Howard, and from his studies concludes that the epiglottis is not the cause of the obstruction in arrested respiration in anæsthesia. If, however, the head is extended and simultaneously projected forward, both the tongue and the epiglottis are raised, and the soft palate is so drawn as to permit of free breathing through the mouth as well as the nose. As to the question of the various methods of performing artificial respiration, that of Sylvester is believed to be by far the best. It is, however, vitally important to have an assistant grasp the feet and hold them motionless, since in this way the extension and upward traction of the arms above the head elevate and dilate the chest. This particularly is the case in children and persons of small weight, as the lower segment of the body readily follows the chest in its upward movement.—*Bulletin of the Johns Hopkins Hospital*, 1895, No. 46, p. 1.

OIL OF TURPENTINE AS A HÆMOSTATIC.

DR. J. SASSE recommends this remedy applied upon cotton to check the bleeding after extraction of teeth. In a case of scorbutus it was used in a two per cent. solution as a mouth-wash, and later undiluted, the gums being painted with it every hour, and a small quantity was given internally. In one instance a vesical hemorrhage, which had resisted salol, boric acid, and uva ursi, was successfully treated by dessertspoonful doses of one-half of one per cent. emulsion of the drug.—*Therapeutische Monatshefte*, 1895, Heft 2, S. 83.

MEDICINE.

UNDER THE CHARGE OF

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THE BLOOD IN CHRONIC CYANOSIS.

In studying the blood of eight cases of chronic cyanosis from congenital heart-disease, VACQUEZ (*Comptes Rendus de la Société de Biologie,* March 8, 1895) found marked changes. In all cases the number of red corpuscles per cubic millimetre was increased, the increase being in direct ratio to the intensity of the cyanosis.

Besides the increase in the number of the red corpuscles, an increase in size was also noted, though not until the cyanosis had become quite marked; in fact, in the earlier years of cyanosis the increase in number was only relative.

In individuals of from twelve to twenty years of age blood-counts of from 5,600,000 to 6,300,000 were found, the diameter of the corpuscles varying from 7.9 μ to 12 μ.

Vacquez does not think that the increase in number of the corpuscles was parallel to the increase in diameter, but thinks that both are due to the same cause.

At the same time with the increase in size and number of the corpuscles there is an increase in the amount of hæmoglobin in each individual corpuscle, so that the hæmoglobin does not show its normal relation to the number of corpuscles.

The question as to whether the increase in size of the corpuscle or the increase in hæmoglobin is the primary process cannot well be answered. The process has been explained on the grounds that in cyanosis the supply of oxygen carried to the tissues is insufficient, and that the corpuscular new-formation is compensatory.

GIBSON (*Lancet,* January 5, 1895) reports a case of a boy, aged eight years, whose red blood-corpuscles were 8,470,000 per c.cm., and the hæmoglobin 110 per cent. He refers to other instances in which this increase in the blood-corpuscles has been noted, and suggests the following interesting explanasion: "In venous stasis the corpuscles are insufficiently oxygenated; they cannot perform such an active part as oxygen-carriers, and they cannot yield too much oxygen to the tissues. It must further be remembered that in cyanosis there is less metabolism in the tissues, and therefore less waste produced. In a word, the functions of the corpuscles being lessened, the tear and wear which they undergo are reduced and the duration of their individual existence increased. The number of the corpuscles must in this way be pro-